

**IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF ARIZONA**

IN RE: BARD IVC FILTERS
PRODUCTS LIABILITY LITIGATION

MDL No. 2641

DEFENDANT BARD CASE PROFILE FORM

For each case, the Bard Defendants must complete this Defendant Profile Form ("DPF") in accordance with the schedule established by the Court's Pretrial Order. In completing this Profile Form, you must answer every question.

I. CASE INFORMATION

This defendant profile form pertains to the following case:

Case caption: _____

Civil Action No.: _____

Court in which action was originally filed: _____

II. CONTACTS WITH IMPLANTING AND REMOVING PHYSICIANS

Plaintiff has identified each healthcare provider who implanted, removed and/or attempted to remove Bard's Filter. With respect to each of those healthcare providers, provide the following information:

A. CONSULTATION AGREEMENT

1. As to the identified healthcare providers, state whether Bard has consulting agreement with the healthcare provider relating to IVC filters that Bard has been able to locate after a reasonable and diligent search.

B. SALES REPRESENTATIVE AND OTHER RELATED CONTACTS

As to each sales representative, territory manager and district manager who had any contact with an identified physician or healthcare provider, set forth the following:

1. Identity and last known address and telephone number of Representative(s):

As to the individual who Bard believes was the territory manager and district manger for the territory where the filter was implanted at the time of implant, set forth the following:

2. Identify the name of the territory manager and district manger, the dates of employment for each, and, if no longer employed by Bard, provide the last known address:

Territory Manager:

Name: _____

Employment Dates: _____

If former, last known address: _____

District Manager:

Name: _____

Employment Dates: _____

If former, last known address: _____

III. MANUFACTURING INFORMATION

- A. Identify the lot number(s) for the Bard filter implanted in Plaintiff:

- B. Identify the lot number for the Bard device used to remove or used to attempt to remove the Bard Filter implanted into Plaintiff:

- C. Identify the location and date of manufacture for each lot set forth in response to A and B above: _____

IV. DOCUMENTS

- A. Please produce the following:
1. The Device History Record (DHR) for the Bard filter at issue, or, if already produced, provide the bates number for the DHR.

2. The Bard complaint file relating to plaintiff's claims, or, in the alternative if already produced, provide the bates number for the complaint.
3. The bates numbers for any documents previously produced that reference the implanting physician and/or the hospital or facility where the device as placed, that Bard is able to identify after a reasonable and diligent search.
4. Any consulting agreement relating to IVC filters that Bard has entered with the physician that implanted the filter.
5. With regard to the plaintiff, any Med Watch Adverse Event Reports in Bard's possession.

Attorney for C. R. Bard, Inc. and Bard Peripheral Vascular, Inc.

[Signature]